

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-978)**

SERIAL NO.

FILING DATE

10/506940

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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3						
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49						
50						
TOTAL IND.	3					
TOTAL DEP.		6				
TOTAL CLAIMS	3	6				

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
51												
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100												
TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												

PTO-1000 (8-78)

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS FOR RE-ENTRY AND RE-ENTRY OFFICE